MANDATORY CRITICAL INFRASTRUCTURE BUSINESS TRAVEL PLAN
FOR TRAVELERS INTO THE CITY & BOROUGH OF YAKUTAT

Due to the rapid spread of COVID-19 and the high incidence of travel-related infection, the City & Borough of Yakutat has instituted a mandatory 14-day self-quarantine for travelers into the City & Borough of Yakutat. The potential for widespread transmission of COVID-19 by infected individuals entering Yakutat threatens the health and well-being of the residents of Yakutat. In an abundance of caution and to assist in flattening the curve regarding the spread of COVID-19 in Alaska, the Yakutat Borough Assembly is implementing advanced protocols to ensure all travelers arriving in Yakutat participate in 14 consecutive days of self-quarantine. If you are a business conducting critical infrastructure within the Borough, you must submit a Travel Plan at least 48 hours before arrival of your workers into the Borough. In case of emergency, business should contact Borough Manager at manager@yakutatak.us or (907) 784-3323 extension 103.

1. BUSINESS/VESSEL NAME
(PRINT)__________________________________________

BUSINESS ADDRESS ________________________________________________________________

CITY ____________________________ STATE __________________ ZIP ______________

BUSINESS PHONE NUMBER_________________________ Email:________________________

2. PURPOSE OF TRAVEL:
_________________________________________________________________________________

3. HOW BUSINESS MEETS DEFINITION OF CRITICAL INFRASTRUCTURE:
_________________________________________________________________________________

4. NAMES OF WORKERS:

Worker name: ____________________________ Arrival date:__________ Departure date:__________

Worker name: ____________________________ Arrival date:__________ Departure date:__________

Worker name: ____________________________ Arrival date:__________ Departure date:__________

Worker name: ____________________________ Arrival date:__________ Departure date:__________

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Worker name: ____________________________ Arrival date:__________ Departure date:__________

Worker name: ____________________________ Arrival date:__________ Departure date:__________

Worker name: ____________________________ Arrival date:__________ Departure date:__________

Worker name: ____________________________ Arrival date:__________ Departure date:__________

(A ttach additional list of workers if necessary)
5. WORK SUPERVISOR/CAPTAIN NAME AND CONTACT NUMBER:
Supervisor/Captain Name:______________________________Phone:______________________________

6. LODGING INFORMATION
Place of Lodging:______________________________Phone:______________________________

7. WORK LOCATION:
Location of work to be performed:__________________________________________________________

8. COVID-19 SAFETY PROTOCOLS IF WORK IS TO BE COMMENCED PRIOR TO 14 DAY QUARANTINE:
Protocols implemented by business in order to avoid the spread of COVID-19 and ensure safety of community:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

(Attach copy of business COVID-19 protocol document if applicable)

**ALL WORKERS WHO HAVE NOT MET THE 14 DAY QUARANTINE REQUIREMENT ARE REQUIRED TO SELF-QUARANTINE AT DESIGNATED PLACE OF LODGING DURING NON-WORK HOURS**

9. NEWLY ARRIVED WORKER SEGREGATION FOR LODGING AND WORK SITE:
How will newly arrived workers be segregated from those already on-site?
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
(If segregation is not possible, the 14 day period for all workers will commence upon the arrival of the last worker)

10. IF VESSEL – “AT-SEA” QUARANTINE INFORMATION:
Date departed last port:_________________________Did any worker leave the vessel at last port?________________
Date of newest worker arrived on vessel:_________________________

11. READ AND SIGN:
I swear or affirm, under penalty of perjury, that the above information I provided on this document is true and correct. I swear I will comply with the self-quarantine regulations as set out in CBY Ordinance 20-667.

SIGNATURE:______________________________________________TITLE:_________________________________________
DATE:_________________________

Submit completed business travel plan to admin@yakutatak.us Questions? (907) 784-3323 x.101